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FACSIMILE TRANSMITTAL SHEET

| DATE: | January | 25, 2006 | | | | | |
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| _ | NUMBER OF PAGES, INCLUDING COVER: 26 | | | | | | |
| TO: | | | | | | | |
| | NAME | /COMPANY | FACSIMILE NO | | | | |
| Examiner Roz Maiorino Group Art Unit 3763 U.S. Patent and Trademark Office | | | 571-273-8300 | | SUCCESSFULLY FAXED | | |
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| FROM: | | Lawrence A Hoffman | | | | | |
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Applicant: Mats ALLERS Serial No.: 10/072,857 Filed: February 5, 2002

> Transmitted herewith is an Amendment in connection with the above-identified patent application.

P/4758-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Mats ALLERS

Date: January 25, 2006

Serial No.: 10/072,857

Group Art Unit: 3763

Filed: February 5, 2002

Examiner: Roz Maiorino

For: CEREBRAL TEMPERATURE CONTROL

Via Facsimile (571) 273-8300 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT/SUBMISSION

Sir:

In response to the Office Action mailed August 25, 2005, please reconsider the above-identified application amended as follows:

FEE CALCULATION

√ No Additional Fee is Required

Any additional fee required has been calculated as follows:

___ If checked, "Small Entity" status is claimed.

| NO. OF CLAIMS | PER THIS RESPONSE | PREVIO PAID | | ADD'L | | RATE | - | UNT UÉ |
|------------------|----------------------|----------------|----------|-------|---|---------------------|----|-----------|
| TOTAL | 76 MINUS | 76 | w | 0 | x | (\$25 SE or \$50) | \$ | 0.00 |
| INDEP. | 12 MINUS | 12 | ** - | 0 | x | (\$100 SE or \$200) | S | 0.00 |
| FIRST PRES | SENTATION OF MULTIPL | E DEPENI | ENT CLA | JM | х | (\$180 SE or \$360) | \$ | 0.00 |
| not less tha | an 20 ** not less | than 3 | | | | TOTAL | \$ | 0.00 |

| If any additional payment is required, a check which includes the calculated fcc of a (OFGS Check No) is attached. |
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| Please charge the above calculated fee to our Deposit Account No. 15-0700. |

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In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosccution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. §1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

AMENDMENTS

| If checked, amendment(s) to the specification are submitted herewith. |
|---|
| If checked, an amended abstract is submitted herewith. |
| ✓ If checked, amendment(s) to the claims are submitted herewith. |
| If checked, amendment(s) to the drawings are submitted herewith. |

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